

UTILITY PATENT APPLICATION TRANSMITTAL Submit an original and a duplicate for fee processing (Only for new nonprovisional applications under 37 CFR 1.53(b))						
ADDRESS TO: Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450	Attorney Docket No. MBHB02-742-C (400/121) First Named Inventor James McSwiggen Express Mail No. EV333564263US					
APPLICATION ELEMENTS	ACCOMPANYING APPLICATION PARTS					
1. ☐ Transmittal Form with Fee 2. ☐ Specification (including claims and abstract)	9. Assignment Papers 10. Power of Attorney 11. English Translation Document (if applicable) 12. Information Disclosure Statement (IDS)					
18. ☑ This is a CONTINUING APPLICATION. Please note the following: a. ☑ This is a ☐ Continuation ☐ Divisional ☑ Continuation-in-part of McSwiggen, PCT/US03/05022, filed February 20, 2003, which claims the benefit of Beigelman USSN 60/358,580 filed February 20, 2002, of Beigelman USSN 60/363,124 filed March 11, 2002, of Beigelman USSN 60/386,782 filed June 6, 2002, of McSwiggen, USSN 60/393,796 filed July 3, 2002, of McSwiggen, USSN 60/399,348 filed July 29, 2002, of Beigelman USSN 60/406,784 filed August 29, 2002, of Beigelman USSN 60/408,378 filed September 5, 2002, of Beigelman USSN 60/409,293 filed September 9, 2002, and of Beigelman USSN 60/440,129 filed January 15, 2003, which is a continuation-in-part of Pavco, USSN 10/306,747, filed November 27, 2002, which claims the benefit of Pavco USSN 60/334,461, filed November 30, 2001, a continuation-in-part of Pavco, USSN 10/287,949 filed November 4, 2002, and a continuation-in-part of Pavco, PCT/US02/17674 filed May 29, 2002. b. ☐ Cancel in this application original claims of the prior application before calculating the filing fee. (At least one claim must remain.) c. ☐ Amend the specification by inserting before the first line the sentence: This is a ☐ continuation ☐ divisional ☐ continuation-in-part of application Serial No. The prior application is assigned of record to						

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APPLICATION FEES							
BASIC FEE					\$ 750.00		
CLAIMS	NUMBER FILED	NUMBER EX	NUMBER EXTRA		= = • =		
Total Claims	36 -20 =	16			\$ 288.00		
Independent Claims	4 - 3 =	1			\$ 84.00		
	Independent Claims $\begin{vmatrix} 4-3 = \\ \end{vmatrix}$ 1 $\begin{vmatrix} x \$84.00 \\ \end{vmatrix}$ Multiple Dependent Claims(s) if applicable +\$280.00				\$		
Total of above calculations =					\$ 1,122.00		
Reduction by 50% for filing by small entity =				\$(561.00)			
Assignment fee if applicable + \$40.00				\$			
TOTAL =				\$ 561.00			
19. Please char	ge my Deposit Account No	o. 13-2490 in the a	amount o	of \$			
20. 🛛 A check in t	20. A check in the amount of \$561.00 is enclosed.						
21. The Commissioner is hereby authorized to credit overpayments or charge any additional fees of the following types to Deposit Account No. 13-2490:							
	s required under 37 CFR 1						
b. 🖂 Fees required under 37 CFR 1.17. c. 🖂 Fees required under 37 CFR 1.18.							
3. 2. 100.	roquired under or or it.						
22. The Commission	ner is hereby generally au	thorized under 37	CFR 1.	136(a)(3) to treat	any future		
	lated application filed purs						
	est therefor, and the Comn						
	13-2490 for any fee that r						
extension of time.							
23. CERTIFICATE OF MAILING							
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	t, under 37 CFR § 1.10,						
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Virginia 22313-1450, on the date indicated below.							
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McDonnell Boehnen Hulbert & Berghoff							
25 SIGNATURE OF ARRUGANT ATTORNEY OR AGENT REQUIRED							
25. SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED							
Name Anita J. Terpstra, Ph.D.							
Reg. No. 47, 32							
Signature (1)							
Date September 16, 2003							
UTIL (Rev. 11/21/00)							